



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 096200002

CITY OR TOWN PEPPERELL

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: PEPPERELL POST #3291 V.F.W. OF THE U.S. INC.

DOING BUSINESS A

ADDRESS 55 LEIGHTON ST.

CITY/TOWN: PEPPERELL

STATE: MA

ZIP CODE: 01463

MANAGER: FARNSWORTH,
WILLIAM O

TYPE OF LICENSE: Veterans club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE FLOOR AND CELLAR: FIRST FLOOR-HALL, KITCHEN, AND BAR: CELLAR-BAR,
MEMBER'S FUNCTION ROOM, AND STORAGE ROOMS.

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 096200003

CITY OR TOWN PEPPERELL

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: MC NABB & KELLEY INC

DOING BUSINESS AS MCNABB'S GENERAL STORE

ADDRESS 123 MAIN ST

CITY/TOWN: PEPPERELL

STATE: MA

ZIP CODE: 01463

MANAGER: MCNABB, JOHN C. TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ENTRANCES AND EXITS ON N. MAIN ST. AND SOUTH AND WEST SIDES OF THE BLDG.
THREE STORIES AND A CELLAR. THERE ARE 16 ROOMS 6 ON THE FIRST FLOOR, 7 ON THE
SECOND AND 3 ON THE THIRD FLOOR. CELLAR FOR STORAGE.

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

Please Check Below:

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DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 096200004

CITY OR TOWN PEPPERELL

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: LIRYC LIQUORS LTD

DOING BUSINESS AS RAY'S PACKAGE STORE

ADDRESS 162 MAIN ST

CITY/TOWN: PEPPERELL

STATE: MA

ZIP CODE: 01463

MANAGER: MORRISSEY,
CHRISTINE

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

1 DISPLAY ROOM, 1 COOLER, 1 STORAGE AREA ON THE FIRST FLOOR AND STORAGE IN THE BASEMENT.

I hereby certify and swear under penalties of perjury that:

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SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 096200009

CITY OR TOWN PEPPERELL

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: TEA CAFÉ INC.

DOING BUSINESS AS

ADDRESS 2 TARBELL STREET

CITY/TOWN: PEPPERELL

STATE: MA

ZIP CODE: 01463

MANAGER: SU, HUI JIAN

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

2000 SQ. FT. ,50 SEAT RESTAURANT; 1 ENTRANCE/EXIT; 2 BATHROOMS

I hereby certify and swear under penalties of perjury that:

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Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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By:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 096200012

CITY OR TOWN PEPPERELL

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DOLCE BRANDS LLC

DOING BUSINESS AS

ADDRESS 105 MAIN ST

CITY/TOWN: PEPPERELL

STATE: MA

ZIP CODE: 01463

MANAGER: SARGENT,
CHRISTOPHER

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

2300 SF WOOD BURNING BRICK OVEN RESTAURANT SERVING PIZZA, LUNCH AND DINNER ENTREES. RESTAURANT CONTAINS APPROX 63 SEATS. FRONT VESTIBULE AND MAIN ENTRANCE; TAKE OUT ENTRANCE ON SIDE OF BUILDING. UP TO 5 OUTDOOR TABLES WITH SEATING FOR UP TO 20 GUESTS FOR OVERFLOW, SEASONAL DINING. STANCHIONS WILL BE PLACED AROUND SEATING CONTAIN GUESTS WITHIN DEFINED AREA.

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